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## BIB DATA SHEET

CONFIRMATION NO. 8059

| SERIAL NUMBER | FILING or 371(c)<br>DATE | CLASS | GROUP ART UNIT | ATTORNEY DOCKET<br>NO. |
|---------------|--------------------------|-------|----------------|------------------------|
| 10/571,512    | 06/05/2006<br>RULE       | 514   | 3771           | 4781078                |

**APPLICANTS**

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**\*\* CONTINUING DATA \*\*\*\*\***

This application is a 371 of PCT/GB04/03928 09/15/2004

YES /CS/

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

UNITED KINGDOM 0321610.8 09/15/2003

YES /CS/

**\*\* IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\***

09/19/2006

| Foreign Priority claimed       | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Met after Allowance | STATE OR COUNTRY | SHEETS DRAWINGS | TOTAL CLAIMS | INDEPENDENT CLAIMS |
|--------------------------------|---|--|------------------|-----------------|--------------|--------------------|
| 35 USC 119(a-d) conditions met | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Initials            | UNITED KINGDOM   | 5               | 26           | 1                  |

**ADDRESS**

Davidson, Davidson & Kappel, LLC  
 485 7th Avenue  
 14th Floor  
 New York, NY 10018  
 UNITED STATES

**TITLE**

Dry powder inhaler

|                                    |   |  |
|------------------------------------|---|--|
| <b>FILING FEE RECEIVED</b><br>1330 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees                            |
|                                    |   | <input type="checkbox"/> 1.16 Fees (Filing)                  |
|                                    |   | <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) |
|                                    |   | <input type="checkbox"/> 1.18 Fees (Issue)                   |
|                                    |   | <input type="checkbox"/> Other _____                         |
|                                    |   | <input type="checkbox"/> Credit                              |